FORM D

Membership Interests

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE



PURSUANT TO REGULATION D,	Prefix		acitai
SECTION 4(6), AND/OR			
UNIFORM LIMITED OFFERING EXEMPTION	DA	ATE RECE	IVED
\			
Name of Offering (check if this is an amendments and name has changed, and indicate change.)			

Type of Filing: New Filing	ndment	
	A. BASIC IDENTIFICATION DATA	JUL 1820
1. Enter the information requested abo	ut the issuer	300 € 0 €0
Name of Issuer (check if this is an am VAIL CAPITAL PARTNERS III, LLC	rendment and name has changed, and indicate	change.) Fine
Address of Executive Offices 1415 Westhaven Drive	(Number and Street, City, State, Zip Code) Vail, Colorado 81657	Telephone Number (Including Area Code) (970) 476-6341
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Real esta	te investment	
		er (please specify):
	Month	Year
Actual or Estimated Date of Incorporation or Organization:		0 4 🛭 Actual 🗀 Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S For State: CN for Ca Jurisdiction)	. Postal Service abbreviation anada; FN for other foreign
GENERAL INSTRUCTIONS		
Federal:		
Who Must File: All issuers making an offering seq. or 15 U.S.C. 77d(6).	of securities in reliance on an exemption under Re	egulation D or Section 4(6), 17 CFR 230.501 et
Securities and Exchange Commission (SEC) on address after the date on which it is due, on the	nan 15 days after the first sale of securities in the oil the earlier of the date it is received by the SEC at date it was mailed by United States registered or ce.	the address given below or, if received at that retified mail to that address.
Where to File: U.S. Securities and Exchange Co	ommission, 450 Fifth Street, N.W., Washington, D.	C. 20549
signed must be photocopies of the manually sign		•
Information Required. A new filing must conta any changes thereto, the information requested it Part E and the Appendix need not be filed with the	in all information requested. Amendments need o in Part C, and any material changes from the info he SEC.	nly report the name of the issuer and offering, rmation previously supplied in Parts A and B.
Filing Fee: There is no federal filing fee.		
State:		
adopted ULOE and that have adopted this form. state where sales are to be, or have been made. I	the Uniform Limited Offering Exemption (ULOE) issuers relying on ULOE must file a separate no if a state requires the payment of a fee as a precon this notice shall be filed in the appropriate states in st be completed.	tice with the Securities Administrator in each
	ATTENTION	
Fallure to file notice in the appropria	te states will not result in a loss of the	Federal exemption. Conversely,

failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such

exemption is predicated on the filing of a federal notice.

			A, BASIC DENI	IFICATION DATA		
2. Ent	er the information re Each promoter of	the issuer, if the is	ssuer has been organized '	within the past five years;		
•	securities of the is	suer:				% or more of a class of equity
•	Each executive of	ficer and director		f corporate general and n	nanaging partner	rs of partnership issuers; and
•	Each general and	managing partner	of partnership issuers			
Check Bo	ox(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Nam	ne (Last name first, i	findividual)				
Gary E	Miller	ss (Number and S	treet, City, State, Zip Cod	e)		
				•		
	esthaven Drive, \ ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Nam	e (Last name first, il	individual)				
Business	or Residence Addres	ss (Number and S	treet, City, State, Zip Cod	e)		
Check Bo	ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Nam	e (Last name first, if	individual)				
Business	or Residence Addres	s (Number and Si	treet, City, State, Zip Cod	e)		
		,				
Check Bo	x(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name	e (Last name first, if	individual)				
			0. 0. 0.			
Business (or Residence Addres	s (Number and St	reet, City, State, Zip Cod	\$)		
Check Bo	x(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name	(Last name first, if	individual)				
Business o	or Residence Address	(Number and Si	reet, City, State, Zip Code	·)		
Check Box	k(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name	(Last name first, if	ndividual)				trianging radio
Business o	r Residence Address	(Number and Str	ect, City, State, Zip Code)		
	(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name	(Last name first, if i	ndividual)		,		
Business or	r Residence Address	(Number and Stre	eet, City, State, Zip Code)		
		(I loo blook at		mal and a section of the section of		
		USE DIANK SNEE	C OF CODY SHOURS BOOKIN	nal copies of this sheet, a	as necessary)	

B. RNFORMATION ABOUT OFFERING 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit?. 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list he name of the broker or dealer. If more than five (5) persons to be listed are associated persons or such a broker or dealer. If more than five (5) persons to be listed are associated persons or such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			1 .		В	. INFORM	IATION A	BOUT OFF	ERING	Han Fr		, ž	
3. Does the offering permit joint ownership of a single unit?	1.	Has the issu	uer sold, o								g?		_
3. Does the offering permit joint ownership of a single unit?	2.	What is the	minimun	n investme	nt that wil	l be accept	ted from ar	ıy individu	ıal?			\$ N/A	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, or commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												Yes	No
indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3.		• •	-	-							\boxtimes	
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		indirectly, a with sales o broker or de dealer. If n you may set	any comr f securiti- caler regis nore than forth the	mission or es in the of stered with five (5) pe information	fering. If the SEC is trons to bon for that	emuneration a person to and/or with the listed ar	on for soli- to be listed h a state or e associate	citation of is an asso states, list d persons	purchaser ciated pers the name	s in conn son or age of the bro	ection nt of a ker or		
Name of Associated Broker or Dealer	Full	Name (Last	name firs	it, if individ	dual)								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States Check "All States or Residence Address (Number and Street, City, State, Zip Code)	Buşi	ness or Resi	dence Ad	dress (Nun	nber and S	treet, City	, State, Zip	Code)	-,				
All States Check All States CA CA CO CT DE DC FL GA [HI] [ID IL] [IN [IA [KS] KY [LA [ME] MD [MA] MI [MN] [MS] [MO] MI [NE] [NV [NH] NI] [NM] [NY [NC] ND [OH] OK [OR] [PA] [RI] [SC SD TN] TX [UT [VT VA] WA [WV WI [WY [PR] WV] [PR] WV [PR] WV WI WV [PR] WV [PR] WV WV WV [PR] WV WV WV WV [PR] WV WV [PR] WV WV WV WV [PR] WV WV WV WV WV WV WV W	Nam	e of Associa	ted Broke	er or Deale	г		,						
AL (AK (AZ (AR (CA (CO (CT (DE (DC (FL (GA (HI (ID (IL (IN (IA (KS (KY (LA (ME (MD (MA (MI (MN (MS (MO (MT (NE (NY (NY (NE (NY (NY (NE (NY (NY	State	s in Which I	Person Li	sted Has So	olicited or	Intends to	Solicit Pu	rchasers					
ILD	(Che	ck "All State	es" or che	ck individe	ual States)				************			🗆	All States
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	[IL] [MT] [RI]	(IN) (NE) (SC)	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM]	[ME] [NY	[MD] [NC]	[MA] [ND]	(MI) (OH)	[MN] [OK]	[MS] [OR]	[MO] [PA]
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Busir	ess or Resid	ence Ado	Iress (Num	ber and St	reet, City,	State, Zip	Code)		······································	·		
Check "All States" or check individual States)	Name	of Associat	ed Broke	r or Dealer									
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA [HI] [ID] [IL] [IN] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers 'Check "All States" or check individual States)	States	in Which P	erson Lis	ted Has So	licited or l	Intends to	Solicit Pur	chasers					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA [HI] [ID] [IL] [IN] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers 'Check "All States" or check individual States)	(Chec	k "All State	s" or chec	k individu	al States).		***********					🗂	All States
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM]	[ME] [NY	[MD] (NC)	[MA] [ND]	[MI] [OH]	[MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	Busin	ess or Reside	ence Addi	ress (Numb	er and Str	eet, City,	State, Zip	Code)					
Check "All States" or check individual States All States All States AL	Name	of Associate	d Broker	or Dealer									
AL) [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NY] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	States	in Which Pe	rson Liste	ed Has Sol	icited or Ir	ntends to S	Solicit Purc	hasers					
IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	Check	"All States	" or check	k individua	l States)			************					All States
	IL] MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggrega Offering P		Amount Aiready Sold
	Debt	\$ <u>-0-</u>		\$ <u>-0-</u>
	Equity			\$0-
	Common Preferred			
	Convertible Securities (including warrants)	\$ <u>-0-</u>		\$ -0-
	Partnership Interests	\$ -0-		\$0-
	Other (Specify -Limited Liability Company Interests)			\$ 3,450,000
	Total		0	\$ 3,450,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
	Accredited Investors	Number Investor 2	rs	Aggregate Dollar Amount of Purchases \$ 3,325,000
	Non-accredited Investors			\$ 125,000
	Total (for filings under Rule 504 only)			\$ N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		}	Ψ_18Ω
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering	Type o Securit	y	Dollar Amount Sold
	Rule 505			\$_N/A
	Regulation A			\$_N/A
	Rule 504,			\$ <u>N/A</u>
	Total	N/A		\$_N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	***********		\$
	Printing and Engraving Costs			\$
	Legal Fees		\boxtimes	\$_10,000
	Accounting Fees			\$
	Engineering Fees.			\$
	Sales Commissions (specify finders' fees separately)	****************		\$
	Other Expenses (identify)			\$
	Total		\boxtimes	\$_10,000

	C. Offering Price, number of investors, expenses	AND I	USE OF PROC	EEDS
	b. Enter the difference between the aggregate offering price given in response to Pa Question 1 and total expenses furnished in response to Part C - Question 4.a. This diffe is the "adjusted gross proceeds to the issuer."			\$ <u>3.490.000</u>
5,	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed used for each of the purposes shown. If the amount for any purpose is not known, furnities timate and check the box to the left of the estimate. The total of the payments listed equal the adjusted gross proceeds to the issuer set forth in response to Part C – Questic above.	must		
			Payments Officers, Directors, Affiliates	& Payments to
	Salaries and fees	🔲	\$	\$
	Purchase of real estate	\boxtimes	\$	\$ 1,990,000
	Purchase, rental or leasing and installation of machinery and equipment		\$	\$
	Construction or leasing of plant buildings and facilities		\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	. 🗆	\$	s
	Repayment of indebtedness		\$, \$
	Working capital		\$	\$_1,500,000
	Other (specify):		\$	\$
	Real estate taxes.		S	\$
	Column Totals	. 🖾	\$	\$ 3,490,000
	Total Payments Listed (column totals added)	,,,,	\boxtimes	\$_3,490,000
	D. FEDERAL SIGNATURE			
ľollo	issuer has duly caused this notice to be signed by the undersigned duly authorized p wing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities a aff, the information furnished by the issuer to any non-accredited investor pursuant to part	nd Exc	change Commis	sion, upon written request of
Issue	er (Print or Type) Signarate	(0	atd	
	L CAPITAL PARTNERS III, LC	<u>c </u>	July	1,2001
	e of Signer (Print or Type) Title of Signer (Print or Type) The Miller Manager		<i>-</i>	,
Gar	y E. Miller Manager			
				•
Inten	ATTENTION_ tional misstatements or omissions of fact constitute federal criminal violations. (See	18 U.S	i.C. 1001.)	

	E. STATE SIGNATURE		
1.	ls any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	Con Annually Column 6 for state response		

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and kno undersigned duly authorized person	ws the contents to be true and has duly caused this notice to be signed on its behalf by the
Issuer (Print or Type) VAIL CAPITAL PARTNERS III, LLC	Signature Date Daly 1, 2005
Name of Signer (Print or Type) Gary E. Miller	Tille of Signer (Pfint or Type) Manager

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		D	

l	Intend to non-s	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State'	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL							ļ		ļ
AK									
ΑZ					<u> </u>				ļ
AR					<u> </u>				<u> </u>
CA		х	\$100,000	1	\$100,000	0	\$0		X
со		X	LLC Interest \$860,000	7	\$860,000	<u> </u>			X
СТ							ļ		
DE						·			
DC									
FL									
GA ²		х	LLC Interest \$200,000	1	\$200,000	0	\$0		X
Н	·								
lD									
IL.		x	\$350,000	2	\$350,000	0	\$0		×
ĺΝ									
lA									
KS									
KY									
LA									
ME									
MD		Х	LLC Interest \$200,000	1	\$200,000	0	\$0		Х
MA			3200,000		• • • -	-			
MI		X	LLC Interest \$415,000	I	\$415,000	0	\$0	· -	X
MN			3113,000						
MS									
MO	x		LLC Interest \$775,000	4	\$650,000	1	\$125,000		X
мт			\$113,000		4 000,000	•	4123,000		
NE			1			<u> </u>			
NV		 	<u> </u>						
									
NH									
MN									

¹ One accredited investor resides in the United Kingdom - \$150,000 investment amount.

1		2	3 Type of security		4	1		Disqual under St	5 ification ate ULOE , attach
	to non-e investo	d to sell accredited rs in State	and aggregate offering price offered in state (Part C-Item 1)		amount purch	vestor and nased in State -Item 2)		explan waiver	ation of granted)
State ¹	Yes	3-ltem I)		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NY	103	x	LLC Interest \$150,000	1	\$150,000	0	\$0		X
NC NC		X	LLC Interest \$100,000	1	\$100,000	0	\$0		X
ND									ļ
ОН									ļ
ок									
OR I									
PA									ļ
RI									ļ
sc								ļ	
SD									
TN ,									
TX		х	\$100,000	1	\$100,000	0	\$0		X
UT									
VT								-	<u> </u>
VA		· x	LLC Interest \$100,000	1	\$100,000	0	\$0		X
WA						ļ			ļ
wv									
WI								ļ	
WY								ļ	
PR									